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PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2004

Application or Docket Number

10/661130

CDAIRS AS FILED - PART I								SMALL ENTITY			OTHER THAN		
TOTAL CLAIMS			· (Colun	30.1)	100!	umn 2)) .	TYPE	<u> </u>	. Of	SMALL	EKTITY	
TOTAL CLAIMS			<u> </u>					RATE	FEE	_	RATE	FEE	
FOR			NUMBER FILED		NUM	NUMBER EXTRA		BASIC F	395.00	OR	BASIC FEI	790.00	
TOTAL CHARGEABLE CLAIMS				minus 20= *				X\$25:		OR	·X501=.		
 _	DEPENDENT	····	minus 3 =		<u> </u>			X kn²		OR	X200=		
MULTIPLE DEFENDENT CLAIM PRESENT								+150=		OR	+300=	 	
* If the difference in column 1 is less than zero, enter *0" in column 2								TOTAL	-	OR			
	CLAIMS AS AMENDED - PART II							:			OTHER	THAN	
		(Column 1)		(Column 2) (Column 3)				SMALL	ENTITY	OR	SMALL		
AMENDMENTA	24240	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	SER SUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI TIONAL FEE	
NON	Total	. 30	Minus	-3	5	=		X 25 =		OR	X\$50=		
AME	Independent	FUTATION OF M	Minus	3	CVIII	1-2		×100:		OR	X200=	4000	
	THOTTICE	ENTATION OF W	OCHPLE DE	PENDENT	COOM			+150=		OR	4300=		
	·						L A	TOTAL		OR	TOTAL EEF TIGGA		
	(Column 1) (Column 2) (Column 3)									-			
AMENDMENT B	·	CLAIMS REMAINING AFTER AMENOMENT		HIGHE NUME PAEVIO PAID F	ER USLY	PRESENT EXTRA		FATE,	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Totai		Minus	K-sk		=:		″χ25=		OR	X50=		
AME.	Independent	*	Minus	g++1	,	=	į.	X 100=		OR	X200=		
	FIRST PRESE	NTATION OF MI	JUTIPLE DEF	PENDENT (CLAIM			+150=		OR	+300=		
								TOTAL			TOTAL		
		A	DOTT. FEE		. ,	voon. FEE							
AMENDMENT C	•	(Column 1) CLAIMS REMAINING AFTER - AMENOMENT		(Colum HIGHE NUMBI PREVIOU PAID FI	st er Jsly	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Σ Q Z	Total .	•	Minus ·	44		=		X25'=		OR	X\$50=		
ME	Independent	•	Minus	***			1	×100 =		OR	X200:		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									J'h			
• 14	If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+300=		
!!	i the "Highest Nur	riber Previously Pa fiber Previously Pa	id For IN THIS	S SPACE is I	ess than	20. enter "20."	AD.	TOTAL OTT. FEE]	OR A	TOTAL DOIT, FEEL		
1	he Highest Num	ber Previously Paid	For Clotal or	Independent	4 is the i	highest ir rater.	lound	in the app	ropriate box	in optu	ma 1	·	
			<u> </u>							•			